Always assume the person has capacity to consent to or refuse treatment. You are required to maximise the person's capacity and facilitate communication.

| QUESTION | | ANSWER YES/NO | |
|-------------------------------------|---|------------------|---|
| 1. | Does the person have capacity to give consent to or refuse treatment him or herself, with appropriate support where necessary | | YES : The person has capacity to make the decision him or herself. The advance decision is not applicable. Ask what s/he wants to do NO : Continue with check list |
| IS THE ADVANCE DECISION VALID? | | | |
| 2. | Has the person withdrawn the advance decision? (This can be done verbally or in writing) | | YES : This is not a valid advance decision. Make sure that you have identified and recorded the evidence that the person withdrew the advance decision. NO : Continue with check list |
| 3. | Since making the advance decision, has the person created a lasting power of attorney (LPA) giving anybody else the authority to refuse or consent to the treatment in question? | | YES : This is not a valid advance decision. The donee(s) of the LPA must give consent to or refuse the treatment. The LPA decision must be in the person's best interests. NO : Continue with check list |
| 4. | Are there reasonable grounds for believing that circumstances exist which the person did not anticipate at the time of making the advance decision and which would have affected his/her decision had s/he anticipated them? | | YES: If such reasonable grounds exist, this will not be an applicable advance decision. It is important to identify the grounds, discuss this with anybody close to the person, and identify why they would have affected his/her decision had s/he anticipated them, and record your reasoning. NO: Continue with the checklist |
| 5. | Has the person done anything that is clearly inconsistent with the advance decision remaining his/her fixed decision? | | YES : This is not a valid advance decision. It is important to identify what the person has done, discuss this with anybody close to the person, explain why this is inconsistent with the advance decision remaining his/her fixed decision, and record your reasons. NO : The advance decision is valid. Continue with the checklist. |
| IS THE ADVANCE DECISION APPLICABLE? | | | |
| 6. | (a) Does the advance decision specify which treatment the person wishes to refuse?*(b) Is the treatment in question that specified in the advance decision? | | YES: to both (a) and (b): Continue with the checklist NO: This is not an applicable advance decision |
| 7. | If the advance decision has specified circumstances in which it is to apply (see question 3 above), do all of those circumstances exist at the time that the decision whether to refuse treatment needs to be made? (N.B. It is possible for a person to decide that the advance decision should apply in all circumstances) | | YES : Continue with the checklist NO : This is not an applicable advance decision |

| LIFE SUSTAINING TREATMENT | | | |
|---------------------------|---|--|--|
| 8. | Is the decision both valid and applicable according to the criteria set out above? | YES: Continue with the check list NO: This is not a binding advance decision to refuse the specified life sustaining treatment | |
| 9. | In your opinion is the treatment in question necessary to sustain the person's life? | YES: Continue with the checklist NO: This is a binding advance decision to refuse the specified non-life-sustaining treatment. It must be respected and followed. | |
| 10. | Does the advance decision contain a statement that it is to apply even if the person's life is at risk? | YES : Continue with the checklist NO : This is not a binding advance decision to refuse the specified life-sustaining treatment. | |
| 11. | Is the advance decision: In writing AND Signed by the person making it or by somebody else on his behalf and at his direction AND Signed by a witness? | YES TO ALL: This is a binding advance decision to refuse the specified life-sustaining treatment. It must be respected and followed. NO TO ANY: This is not a binding advance decision to refuse the specified life-sustaining treatment. | |

^{*}NB It is possible to use layman's language to specify both treatment and circumstances

